LOUIE V. HARRISON III

PTO/SB/01 (08-03)
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Attorney Docket Number

A331860.9US

First Named Inventor

DECLARATION FOR UTILITY OR

DESIGN

PATENT APPLICATION			COMPLETE IF KNOWN			
(37 CFR 1.63)			Application Number			
Declaration Submitted OR With Initial Filing Declaration Submitted a Filing (surch (37 CFR 1.1 required)	Declar	ation	Filing Date			
		itted after Initial (surcharge	Art Unit			
	R 1.16 (e))	Examiner Name		·		
I hereby declare that:						
Each inventor's residence, ma	ailing address,	and citizenship are a	as stated below next to	their name.		
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
DENTAL COMPOSIT	E DELIVE	RY SYSTEM A	ND METHOD			
	•					
the specification of which (Title of the Invention)						
is attached hereto						
OR						
was filed on (MM/DD/Y	~~~ [
was filed on (MM/DD/YYYY) as United States Application Number or PCT International						
Application Number		and was amended	on (MM/DD/YYYY)		(if applicable).	
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as						
amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for						
continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority	benefits unde	r 35 U.S.C. 119(a)-	(d) or (f) or 365(b) o	f any foreign applica	tion(s) for patent,	
inventor's or plant breeder's ri country other than the United	States of Amer	ica, listed below and	l have also identified h	elow by checking the	hov any foreign	
application for patent, inventor before that of the application o	's or plant bree	eder's rights certificat	te(s), or any PCT inter	national application h	aving a filing date	
Prior Foreign Application		Foreign Filing	Date Prio	rity Certified	Copy Attached?	
Number(s)	Country	(MM/DD/YYY		aimed Yes	No	
				_		
					i	
Additional foreign applicat	ion numbers ar	e listed on a supplem		et PTO/SB/02B attac	hed hereto.	
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[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility r D sign Patent Applicati n

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NAME OF SOLE OR F	IRST INVENTOR:		oetition has t	reen filed for th	is unsigned inventor	
Given Name (first and middle [if any]	LOUIE V	3	- 1	Family Name or Surname HARF		-
Inventor's Signature	DV y	Jun-	11		Date	8/04
Residence: City	State		Country		Citizenship	7
WINONA Mailing Address	MS		USA		U.S.	
Mailing Address 14 ROLLING GREEN CIRC)LE					
City	State		ZIP		- London	
WINONA	MS		38967	7	Country USA	
NAME OF SECOND IN	VENTOR:			etition has bee	n filed for this unsigne	4 inventor
Given Name (first and middle [if any])	N/A		F	amily Name r Sumame	If fact for the thought	O Invento
Inventor's Signature					Date	
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Additional inventors or a	to and an annual think arm h					
Additional inventors or a	legal representative are be	sing named on the	supplemental sher	at(s) PTO/SB/02A o	or 02LR attached hereto.	

PTO/SB/81 (09403)

Under the Paperwork Reduction Act of 1995, no persons are	Application Number	The second num
POWER OF ATTORNEY	Filing Date	
and CORRESPONDENCE ADDRESS INDICATION FORM	First Named Inventor	LOUIE V. HARRISON III
	Title	DENTAL COMPOSITE DELIVERY SYST
	Art Unit	SOLUTION STATE
	Examiner Name	
	Afterney Docket Number	A331860.9US

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OR	36536		
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Applicant/Inventor.			
Assignee of record of the entire interest. See 37 C Statement under 37 CFR 3.73(b) is enclosed. (For	FR 3.71.		
	of Applicant or Assignee of Record		
Name LOUIE V. HARRISON, III			
Signature & V Au jill			
Date 1/25/64 Telephone 2-			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple			
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